

United States Mission to Kenya

President's Emergency Plan for AIDS Relief

2011 Overview

The United States Global AIDS Coordinator has maintained a comprehensive program of HIV prevention, care, and treatment in Kenya funded and supported by the American people. Such efforts have drawn mixed reaction in the US, however, a recent study by Dr Eran Bendavid of Stanford University found that PEPFAR funding for HIV programmes between 2004-2008, lowered the risk of death in countries receiving funds by around 16%, in effect emphasising long term impact of PEPFAR's funding on mortality. Such impacts have been possible under the leadership of the US Ambassador to Kenya, as well as committed Kenyan and American technical staff of the U.S. Centers for Disease Control and Prevention, Walter Reed Medical Research Unit, U.S. Agency for International Development, and staff and volunteers of the Peace Corps. These men and women collaborate with hundreds of local and international partners across Kenya to prevent new infections and to ease the burdens of those already ill and those who care for them. This fact sheet highlights achieved results in 2011.

PREVENTION

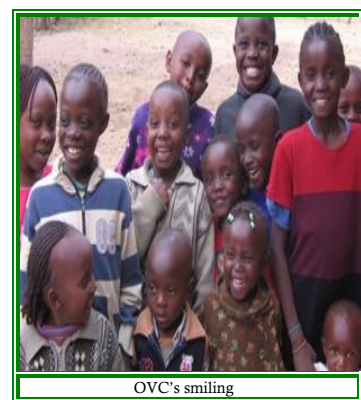
Efforts to prevent the spread of HIV were organized across seven areas with notable achievements including:

- Helped over 67,000 HIV-positive mothers protect their newborn infants from HIV thus averting **17,000** infections.
- Reached nearly 350,000 MARP's with individual or group level interventions
- About 720,000 people were reached with abstinence and faithfulness messages
- Promoted a safe blood supply by collecting 122,639 pints of which only 858 (0.7%) were infected
- Supported safer medical injection practices by training about 1200 health care workers on HCWM and injection safety and supplied over 300 sets of personal protective equipment (PPE) to waste handlers
- About 183,000 uninfected men of various ages were circumcised in medical settings, especially in areas that do not circumcise traditionally
- About 23,000 people were reached with Post Exposure Prophylaxis half of whom were rape or sexual assault victims

CARE AND SUPPORT

Emergency Plan care and support programs for Kenya in 2011 achieved the following:

- Cared for over 558,000 orphans and vulnerable children
- About 7.5 million men and women were counseled and tested, including about 1.2 million pregnant women
- Provided hospice, home-based care, and other basic health care services to about 1.2 Kenyan men, women and children (including OVCs) with HIV-related illnesses
- 35,917 HIV positive people were diagnosed with TB and effectively managed



OVC's smiling

These programs provided care and support to over 1.5 million Kenyans, including those receiving anti-retroviral treatment (ART).

TREATMENT

Within the last five years, PEPFAR increased treatment funding massively mainly because many Kenyans were already ill as a result of long-term infection with HIV. Moreover, effective medicines are currently affordable. PEPFAR therefore committed funds to make life-prolonging treatment available to as many people as possible as soon as they needed it. Such efforts have resulted in an exponential increase in the number of people accessing treatment from a paltry 36,000 in 2005 to about half a million currently, in effect reducing mortality and morbidity from HIV. Under treatment the following were achieved in 2011:

- High quality anti-retroviral treatment services were provided to about half a million people (72% of all people needing ART), including 49,392 children
- Improved infrastructure for 300 laboratories now capable of monitoring treatment safety and effectiveness

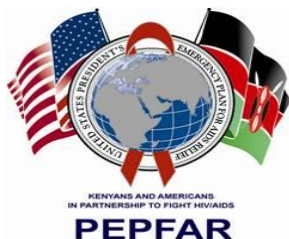
Beginning with only three treatment sites directly supported by the United States in 2003, PEPFAR now directly supports over 1,500 sites across Kenya. In addition, there are 16 quality assurance laboratories that are accredited with WHO/AFRO international standards. Together, these treatment programs prevented approximately **70,000** deaths that might otherwise have occurred in 2011. Since 2004 when PEPFAR was started and scaled up in subsequent years, **270,000** deaths have been averted.

COORDINATION

All PEPFAR programs support the prevention, care, and treatment priorities of the Government of Kenya. The U.S. Interagency Team for the Emergency Plan works with the National AIDS Control Council in the Office of the President, the Ministry of Public Health and Sanitation, Ministry of Medical Services, Department of Children's Services in the Ministry of Home Affairs, and the Ministry of Education to ensure that programs we support meet Kenya's needs. PEPFAR further coordinates with UNAIDS, UNICEF, the World Bank, the World Health Organization, and Development Partners in Health-Kenya to promote high levels of complementarity across all partners engaged in Kenya's HIV response.

FOR FURTHER INFORMATION

Write to PEPFAR Office, US Embassy, PO Box 606 Village Market, Nairobi 00621; email KenyaPEPFARinfo@state.gov



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2011 Coordination Overview

The United States Global AIDS Coordinator has approved a comprehensive program of HIV prevention, care and treatment in Kenya supported by the American people. Under the leadership of the US Ambassador to Kenya, the Emergency Plan is implemented by committed Kenyan and American technical staff of the U.S. Centers for Disease Control and Prevention, Walter Reed Medical Research Unit, U.S. Agency for International Development, and staff and volunteers of the Peace Corps. This fact sheet highlights our continuing commitment to **coordination with the Government of Kenya (GoK)** and other key stakeholders.

All of PEPFAR's efforts support Kenya's response to HIV in a manner consistent with the "Three Ones" principles and the priorities of the GoK. The U.S. Interagency Team for the Emergency Plan works with the National AIDS Control Council (NACC) in the Ministry of Special Programs/Office of the President, the Ministries of Medical Services and Public Health and Sanitation, the Department of Children's Services, the Ministry of Education, and other GoK offices and agencies to assure that programs we support meet Kenya's needs. We further coordinate with UNAIDS, UNICEF, the World Bank, the World Health Organization, and Development Partners for Health in Kenya to promote high levels of complementarities across the donor community.

ONE NATIONAL AIDS COORDINATING AUTHORITY

NACC is the designated multisectoral office charged with coordinating the response to HIV in Kenya. We routinely participate in the HIVAIDS Interagency Coordinating Committee and its Advisory Committee convened by NACC and uses these fora to brief host government, key HIV implementing agencies, and development counterparts on PEPFAR plans and strategies.

ONE HIV/AIDS ACTION FRAMEWORK

NACC is also responsible for developing and facilitating implementation of multi-year Kenya National AIDS Strategic Plans (KNASP). KNASP (III) is about to come to an end and KNASP (IV) developed. PEPFAR/Kenya is providing expert technical assistance and substantial funding to support this critical process. PEPFAR prevention, care, support, treatment and mitigation activities for 2012 are fully aligned with the priorities specified in the current KNASP, and all future activity will be similarly aligned with KNASP III and IV. In coordination with the goals and strategies of KNASP III, the GOK and USG developed the Kenya Partnership Framework (PF) followed by the Kenya Partnership Framework Implementation Plan (PFIP). The signing of the PF and the development of the PFIP represented an unprecedented level of coordination and collaboration between the GOK, USG, and other partners in jointly setting programmatic priorities, articulating individual and shared objectives, and undertaking the strategic planning and prioritization of the Kenyan national AIDS response.

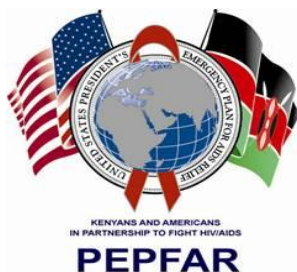
ONE COUNTRY-LEVEL HIV/AIDS MONITORING & EVALUATION SYSTEM

In addition to tracking and reporting on program indicators that are consistent with those endorsed by UNAIDS, the World Health Organization and the World Bank, PEPFAR/Kenya directly supports staff positions at NACC for monitoring and evaluation (M&E) of the national response. We also support extensive HIV M&E efforts in the health sector through a Cooperative Agreement with the National AIDS and STD Control Programme.

To help guide the plans and programs of the host government and all other development partners, the U.S. government has long supported epidemiologic, behavioral, and other surveillance to monitor the course of the epidemic. In 2012, we will continue to support sentinel surveillance in antenatal and sexually-transmitted infection clinical settings, as well as evaluation and data collection and publication of the results of the Kenya AIDS Indicator Survey (KAIS), a national survey to be completed in 2011. The first KAIS in 2007, provided stakeholders concerned about HIV in Kenya with the most accurate picture of the epidemic of any sub-Saharan African nation, and offered a rich resource to support evidence-based program planning.

FOR FURTHER INFORMATION

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United States Mission to Kenya

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2011 Prevention Fact Sheet

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CLINICAL / TECHNICAL PREVENTION INTERVENTIONS

PEPFAR supports clinical and technical efforts to prevent HIV transmission including voluntary medical male circumcision, improving blood safety and blood products, and reducing accidental needle stick injuries. In addition, PEP is offered to those exposed accidentally or through rape and/or sexual violence. The United States government has supported safe blood supply in Kenya since 1998 following the tragic Embassy bombing where thousands of those injured needed blood. In 2011, achievements under technical prevention include:

- About 183,000 uninfected men were circumcised in medical settings, especially in areas that do not circumcise traditionally
- About 23,000 people were reached with Post Exposure Prophylaxis half of whom were rape or sexual assault victims
- Promoted a safe blood supply by collecting 122,639 pints of which only 858 (0.7%) were infected
- Supported safer medical injection practices by training about 1200 health care workers on HCWM and injection safety and supplied over 300 sets of personal protective equipment (PPE) to waste handlers

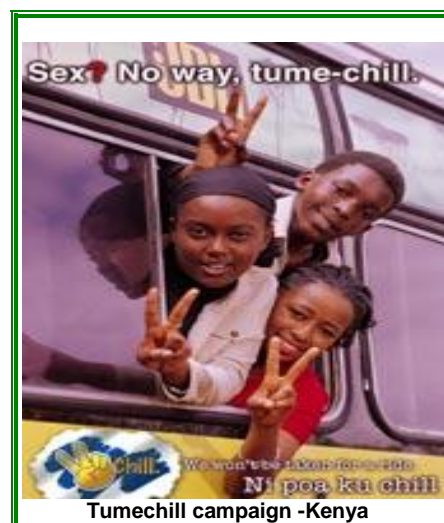
PREVENTION OF MOTHER TO CHILD TRANSMISSION

- Reached about 1.2 million women with prevention of mother-to-child transmission services
- Helped over 67,000 HIV-positive mothers protect their newborn infants from HIV thus averting **17,000** infections. Since 2004 when PEPFAR was started and scaled up in subsequent years, **46,000** infant infections have been averted.

SEXUAL TRANSMISSION PREVENTION INTERVENTIONS

- Slightly over 350,000 MARP's were reached with individual or group level interventions
 - Slightly over 720,000 people were reached with abstinence and faithfulness messages
 - Reached 175,826 HIV positive people with new initiatives for prevention.
- Other prevention interventions included;
- Assisting intravenous drug users to learn their HIV status, to be referred for treatment if found to be HIV positive, and to receive comprehensive HIV prevention information that both protects them and others from infection
 - Confronting underlying gender norms and male behaviors in order to reduce incidence of gender based violence and other gender-discriminatory practices that are closely linked to increased vulnerability to HIV

Together, these programs prevented nearly 200,000 infections that might have otherwise occurred by 2011.



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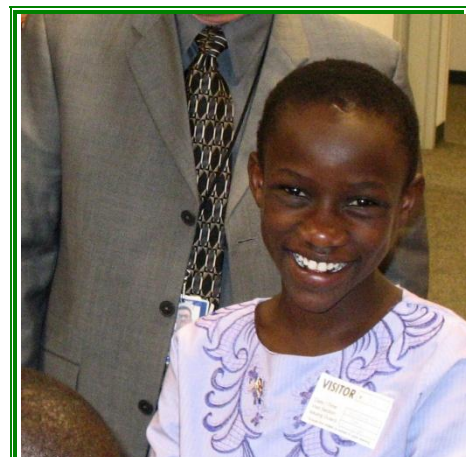


United States Mission to Kenya President's Emergency Plan for AIDS Relief 2011 Care and Support Fact Sheet

The United States Global AIDS Coordinator has approved a comprehensive program of HIV prevention, care, and treatment in Kenya supported by the American people. Under the leadership of the US Ambassador to Kenya, the Emergency Plan is implemented by committed Kenyan and American technical staff of the U.S. Centers for Disease Control and Prevention, the U.S. Agency for International Development, the Walter Reed Medical Research Unit, and staff and volunteers of the Peace Corps. These men and women work with hundreds of local and international partners across Kenya to prevent new infections, to provide treatment to those already ill, and to support those who care for them. This fact sheet highlights achievements for care **and support activities** in 2011.

CARING FOR ORPHANS AND VULNERABLE CHILDREN

- PEPFAR-supported programs, in collaboration with Kenya's Department of Children's Services, care for 558,036 orphans and vulnerable children (OVC) with education, housing, nutrition, psychosocial support, and other essential services
- PEPFAR supported participation of OVC in age-appropriate HIV education and prevention programs
- PEPFAR supported adolescents affected by HIV, including orphans, heads of households, HIV-positive young people and out-of-school youth



PEPFAR reaches Kenyans all across the country, including slums such as in Kibera where the smiling OVC is located.

SUPPORTING HIV AFFECTED HOUSEHOLDS

- Provided home-based care, hospice, and other basic health care services to over 1, 152, 263 Kenyan men, women and children with HIV-related illnesses
- Diagnosed and effectively managed TB and HIV co-infection amongst 35,917 clients
 - Provided a basic care package to 138,272 HIV-positive individuals, including safe water, nutritional support, and medications to treat opportunistic infections often associated with HIV
- PEPFAR supported new and existing community networks to care for people living with HIV in 2011 with the results expected in 2012
- PEPFAR also established legal support programs to guide inheritance planning and the right of widows to inherit property, with the results expected in 2012

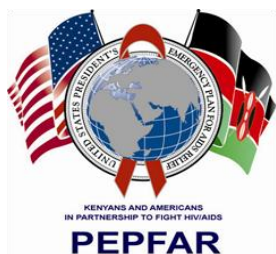
COUNSELING AND TESTING

- Counseling and testing (CT) efforts in 2011 helped more than 7.5 million, men and women know their HIV status, including 1.2 million pregnant women
- Supported more than 5,000 service outlets to provide CT according to national and international standards

These programs will provide care and support to 1.5 million Kenyans, including those receiving anti-retroviral treatment (ART).

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United States Mission to Kenya

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2011 Treatment Fact Sheet

The United States Global AIDS Coordinator has approved a comprehensive program of HIV prevention, care, and treatment in Kenya supported by the American people. Under the leadership of the US Ambassador to Kenya, the Emergency Plan is implemented by committed Kenyan and American technical staff of the U.S. Centers for Disease Control and Prevention, the U.S. Agency for International Development, the Walter Reed Medical Research Unit, and staff and volunteers of the Peace Corps. These men and women work with hundreds of local and international partners across Kenya to prevent new infections, to provide treatment to those already ill, and to support those who care for them. This fact sheet highlights achievements made in 2011 and planned **treatment activities** in 2012.

ANTI-RETROVIRAL MEDICATIONS

PEPFAR Kenya purchases anti-retroviral drugs (ARVs) from manufacturers holding the original patents as well as from generic manufacturers whose products have been approved for quality and safety by the United States Food and Drug Administration. Specific activities and achievements include:

- Directly purchased ARVs for 493,865 people
- Strengthening public sector commodity forecasting, procurement and distribution systems, and
- Strengthening drug quality monitoring by National Quality Control Laboratory

PEPFAR provided direct support to over 1500 sites providing ARVs around Kenya. Additionally indirect support was provided through collaboration and partnerships, to nearly all sites providing ARVs in the country.

ANTI-RETROVIRAL TREATMENT

- Provided high quality anti-retroviral treatment (ART) services to about 500,000 people, including 49,392 children
- Improving linkages between treatment sites and strengthening referral systems based on the network model
- Offering classroom and practical training in adult and pediatric HIV treatment using national training materials
- Coordinating with other donors to improve infrastructure, and
- Continuing support for critical staffing requirements to improve quality of care
- By the end of 2011, about 500,000 Kenyans were on ART through PEPFAR support



Beginning with only three treatment sites directly supported by the United States in 2003, PEPFAR now directly supports over 1300 sites across Kenya



PEPFAR invests in laboratories across the country for quick and efficient results analysis and improved care

LABORATORY SUPPORT

PEPFAR strengthened laboratory services at the both clinical and national reference levels. This includes:

- Increasing the capacity of health systems to improve logistics management and distribution, resulting in fewer test kit or reagent stock-outs for HIV testing and care
- Increasing the quantity and quality of human resources at laboratories at all levels
- Improving quality assurance for over 300 laboratories with the capacity for HIV tests and CD4 lymphocyte tests to screen and monitor patients on ART with 16 laboratories accredited to world standards
- Implementing the Medical Laboratory Services of Kenya National Policy guidelines and the 2005-2010 Strategic Plan, with national and regional laboratories effectively serving as reference laboratories for the country

Together, these treatment programs prevented approximately **70,000** deaths that might otherwise have occurred in 2011.

Overall, since 2004 as a result of PEPFAR scale up, **270,000** deaths have been averted.

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United States Mission to Kenya President's Emergency Plan for AIDS Relief 2011 Gender Overview

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Addressing gender issues is essential to reducing the vulnerability of women and men to HIV infection. Addressing gender factors such as traditional norms, roles, and practices, facilitates the achievement of program goals, guarantees women and men's equitable access to treatment, strengthens program quality and sustainability, and prevents unintentional discrimination or harm to men or women through existing programs. PEPFAR Kenya's gender program activities include:

Increasing Gender Equity in HIV Programs and Services

- Increasing gender equity by targeting pregnant women and reaching out to their male sexual partners
- Developing and monitoring gender-specific program indicators to provide more comprehensive measures of gender equity in activities and services; adapting service delivery models to reduce barriers to women's access and participation
- Mitigating the burden of care on women and girls by linking treatment and care programs with community efforts that provide resources such as food, support for school expenses, household help, farm labor and child care

Addressing Male Norms and Behaviors

- Facilitating strong male peer support through programs such as **Men as Partners** and **Movement of Men against AIDS** that focus on responsible male behavior
- Structuring the Partnership for an HIV-Free Generation and OVC programs to create positive norms and roles for youth moving into adulthood
- Using couples HIV counseling and testing as an opportunity to address gender norms and educate men

Reducing Gender-Based Violence and Coercion

- Strengthening policy and legal frameworks that outlaw gender-based violence (GBV), and increasing awareness on GBV and reducing women's vulnerability to HIV by designing a GBV advocacy strategy
- Providing support services for victims of sexual abuse and violence, and empowering women to mitigate potential violence in their relationships
- Supporting activities of community- and faith-based organizations to change social norms that perpetuate male violence against women

Increasing Women's Access to Income and Productive Resources

- Supporting efforts to provide women with economic opportunities to empower them to avoid high-risk behaviors
- Extending micro-finance programs to HIV-positive women and OVC caregivers
- Partnering with women's organizations to ensure that girls are given equal opportunity to attend school
- Addressing the special needs of women with physical disabilities
- 4870 women were reached by individual, small group or community led intervention that aims to increase access to income and productive resources of women and girls impacted by HIV/AIDS in 2011

Increasing Women's Legal Rights and Protection

- Supporting national policies that protect victims of sexual violence
- Improving legal services for women experiencing barriers to access HIV services
- Increasing awareness and enforcement of existing laws supporting women's rights



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